



PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0651-0032
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FEE TRANSMITTAL For FY 2009		Complete if Known	
		Application Number	10/001,772-Conf. #4306
		Filing Date	October 31, 2001
		First Named Inventor	Anand Subramanian
		Examiner Name	R. Alvarez
		Art Unit	3688
		Attorney Docket No.	03485/100H799-US1
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	85.00	

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 04-0100	Deposit Account Name: Darby & Darby P.C.		
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments			

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
_____ - or HP = _____ x _____ = _____						
HP = highest number of total claims paid for, if greater than 20.						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
_____ - or HP = _____ x _____ = _____						
HP = highest number of independent claims paid for, if greater than 3.						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____ /50 = _____ (round up to a whole number) x _____ = _____				

4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 2251 Extension for response within first month	65.00
2401 Notice of appeal (\$250 previously paid)	20.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	44,528
Name (Print/Type)	Thomas J. Bean	Telephone	(212) 527-7700
		Date	June 18, 2009



PTO/SB/21 (04-09)

Approved for use through 05/31/2009. OMB 0651-0031

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/001,772-Conf. #4306
Filing Date	October 31, 2001
First Named Inventor	Anand Subramanian
Art Unit	3688
Examiner Name	R. Alvarez
Attorney Docket Number	03485/100H799-US1

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): Return Receipt Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	DARBY & DARBY P.C.		
Signature			
Printed name	Thomas J. Bean		
Date	June 18, 2009	Reg. No.	44,528



Application No. (if known): 10/001,772

Attorney Docket No.: 03485/100H799-US1

Certificate of Express Mailing Under 37 CFR 1.10

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Fee Transmittal (1 page)

One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)

Transmittal (1 page)

Notice of Appeal (1 page)

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